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OFFICIAL **ARMSTRONG TEASDALE LLP**

One Metropolitan Square, Suite 2600
St. Louis, Missouri 63102-2740
Phone: (314) 621-5070
Fax: (314) 621-5065
www.armstrongteasdale.com

**CERTIFICATE OF FACSIMILE TRANSMISSION TO THE
UNITED STATES PATENT AND TRADEMARK OFFICE**

DATE: April 27, 2004

TO: Examiner: Josiah C. Cocks : **RE: U.S. Patent Application**
Art Unit: 3749 : **Serial No.: 09/682,622**
Fax: 703-872-9306 : **Applicant: Daniel Canon**
From: Thomas M. Fisher : **Atty. Dkt. No.: 9D-RG-19584**

DOCUMENTS SUBMITTED WITH TRANSMISSION:

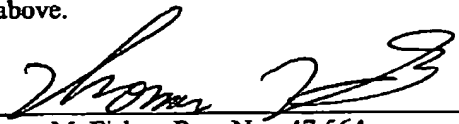
Amendment in Response to the Office Action dated February 10, 2004 (16 pgs.);
Amendment Transmittal (3 pgs.); and,
Certificate of Facsimile Transmission (1 pg.)

Total pages including cover page: 20
If all pages are not received, please contact: Laura Davis at Ext. 7447

RE: The above referenced U.S. Patent Application
Title: FLAME BURNER IGNITION SYSTEM
Filed: September 28, 2001
AT File No. 13307-149

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that these papers are being facsimile transmitted to the U.S. Patent and Trademark Office,
Facsimile Number 703-872-9306 on the date shown above.


Thomas M. Fisher, Reg. No.: 47,564

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PATENT
Attorney Docket No.: 9D-RG-19584

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Daniel Canon
Serial No.: 09/682,622
Filed: September 28, 2001
For: FLAME BURNER IGNITION SYSTEM

Group No.: 3749
Examiner: Cocks, Josiah C.

Mail Stop: NON-FEE AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:
 - Amendment In Response to the Office Action dated February 10, 2004 (16 pages)
 - Amendment Transmittal (3 pages)
 - Certificate of Facsimile Transmission to the United States Patent and Trademark Office (1 page)

STATUS

2. Applicant
☒ claims small entity status.
☐ is other than a small entity.

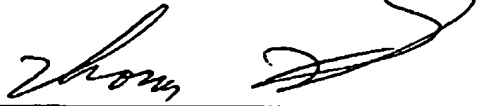
CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8a)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING
____ deposited with the United States Postal Service
with sufficient postage as Express Mail, in an envelope
addressed to the Commissioner for Patents, Washington,
D.C. 20231 *Express Mail No.*: _____

Date: April 27, 2004

FACSIMILE
☒ Transmitted by facsimile to the Patent and
Trademark Office to 703-872-9306.



Thomas M. Fisher
Reg No. 47,564

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) _____ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ first month	\$ 110.00	\$ 55.00
_____ second month	\$ 400.00	\$ 200.00
_____ third month	\$ 920.00	\$ 460.00
_____ fourth month	\$1,440.00	\$ 720.00
_____ fifth month	\$1,960.00	\$ 980.00

Fee: \$ _____

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

_____ An extension of _____ months has already been secured. The fee paid therefor \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$.

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL	11	MINUS	12	= 0	x \$9 = \$		x \$18 = \$ 0.00
INDEP.	4	MINUS	4	= 0	x \$42 = \$		x \$84 = \$
— FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$130 = \$		+ \$280 = \$
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$ 0.00

- (a) ☒ No additional fee for Claims is required

OR

- (b) _____ Total additional fee for claims required \$ _____

FEE PAYMENT

5. _____ Attached is a check in the sum of \$ _____
 _____ Charge Deposit Account No. 01-2384 the sum of \$. _____
 A duplicate of this transmittal is attached.

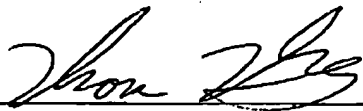
FEE DEFICIENCY

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. _____ Other:


 Thomas M. Fisher
 Reg. No. 47,564
 ARMSTRONG TEASDALE LLP
 One Metropolitan Square, Suite 2600
 St. Louis, MO 63102
 314/621-5070